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APPLICATION NO.	FILING DATE	FILING DATE		FIRST NAMED INVEN	TOR	OR ATTORNE			OCKET NO.	CONFIRMATION NO.		
10/771,911	02/04/2004		Yih-Shin Tan		5577-289			289	3483			
TITLE OF INVENTION SERVICE GRIDS	: METHODS, SYSTEM	IS; AND	COMPUTER PR	ROGRAM PRODUC	rs FC	OR DYNAMIC IN	TER-O	PERAI	BILITY OF NO	DES IN		
APPLN, TYPE	SMALL ENTITY	ISS	UE FEE DUE	PUBLICATION FEE I	OUE	PREV. PAID ISSUE	FEE	TOTAL FEE(S) DUE		DATE DUE		
nonprovisional	NO		\$1440	\$300		\$0	\$1740		\$1740	01/18/2008		
EXAMINER			ART UNIT	CLASS-SUBCLASS								
ENG, DAVID Y			2155	709-238000								
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 					ne patent front page, list , Joseph Bracken;					ken;		
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.				(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, Myers Big				igel	Siblev &			
TR'Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 2 Sajovec, P.A. 3								
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE	PRINTED ON T	THE PATENT (print of	or typ	e)						
PLEASE NOTE: Unl	ess an assignee is ident h in 37 CFR 3.11. Com	ified bel	low, no assignee	data will appear on t	he pa	tent. If an assigne	ee is ide	entified	d below, the do	cument	has been filed for	
(A) NAME OF ASSIG			1 11113 101111 10 110	(B) RESIDENCE: (C			OUNTI	RY)				
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Please check the appropr	iate assignee category or	categor	ies (will not be pr	inted on the patent):		Individual 💆 Co	rporatio	n or o	ther private gro	p entity	Government	
4a. The following fee(s):	are submitted:		46	. Payment of Fee(s):	(Pleas	se first reapply an	y previ	ously	paid issue fee s	hown at	oove)	
Issue Fee				A check is enclosed.								
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5. Change in Entity Star	tus (from status indicate	d above)			<u>.</u>				 `			
a. Applicant claim	s SMALL ENTITY state	15, 56 e 3	7 CFR 1.27.	☐ b. Applicant is no	o long	ger claiming SMAL	L ENT	ITY st	atus. See 37 CF	R 1.27(g	g)(2).	
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Authorized Signature				· · · · · · · · · · · · · · · · · · ·		Date CI FC:150	/ /	2/5	270			
Typed or printed name	Robert N.	Crou	se ————			Registration N	6. 4	4,6	5.08 DA		 -	
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